





FORM PTO-1449

## INFORMATION DISCLOSURE CITATION

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09/800,000Applicant:  
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## FOREIGN PATENT DOCUMENTS

Examiner Initial	Patent Number	Publication Date	Country/Issuing Body	Class	Sub-Class	Translation
RY	DE 2004511	8/05/71	Germany			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	DE 2804801	8/09/79	Germany (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	DE 3736397	5/11/89	Germany (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	DE 3907611	9/13/90	Germany (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 2008055	1/11/90	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 2011329	1/16/90	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 3001952	1/8/91	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 3043270	4/23/91	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 4258244	9/14/92	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 5015470	1/26/93	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	JP 5601230	1/12/81	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
RY	JP 63020525	2/10/88	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

## OTHER DOCUMENTS (Including Author, Title, Date, etc.)

Examiner	<i>Ren Yan</i>	Date Considered	<i>1/13/05</i>
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.			